

FEB 25 2010

BY [REDACTED] DEPUTY

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A Public Document

Please type or print in ink.

| | | | | |
|---|---------|----------|--------------------------|----------|
| NAME (LAST) | (FIRST) | (MIDDLE) | DAYTIME TELEPHONE NUMBER | |
| Murray | Michael | H | | |
| MAILING ADDRESS (Business Address - Applicable) | STREET | CITY | STATE | ZIP CODE |
| | | | OPTIONAL: E-MAIL ADDRESS | |

1. Office, Agency, or Court

Name of Office, Agency, or Court:

Glenn County

Division, Board, District, if applicable:

Board of Supervisors

Your Position:

County Supervisor District 4

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: See Attached List

Position: Supervisor, Director, Commissioner

2. Jurisdiction of Office (Check at least one box)

☐ State

☒ County of Glenn

☐ City of _____

☐ Multi-County _____

☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial

Date: ____/____/____

☒ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is ____/____/____, through December 31, 2009.

☐ Leaving Office

Date Left: ____/____/____

(Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate

Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 6

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☒ Yes - schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes - schedule attached
Investments (10% or Greater Ownership)

Schedule B ☒ Yes - schedule attached
Real Property

Schedule C ☒ Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☐ Yes - schedule attached
Income - Gifts

Schedule E ☐ Yes - schedule attached
Income - Gifts - Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed February 25, 2010

Signature

(Print)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Michael H. Murray

| | |
|--|--|
| <p>▶ NAME OF BUSINESS ENTITY see attached list</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <hr/> <p>FAIR MARKET VALUE</p> <p><input type="checkbox"/> \$2,000 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000</p> <p><input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT</p> <p><input type="checkbox"/> Stock <input checked="" type="checkbox"/> Other stocks & mutual funds</p> <p><small>(Describe)</small></p> <p><input type="checkbox"/> Partnership <input type="radio"/> Income of \$0 - \$500</p> <p><input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE:</p> <p>____/____/09 ____/____/09</p> <p>ACQUIRED DISPOSED</p> | <p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <hr/> <p>FAIR MARKET VALUE</p> <p><input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000</p> <p><input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT</p> <p><input type="checkbox"/> Stock <input type="checkbox"/> Other</p> <p><small>(Describe)</small></p> <p><input type="checkbox"/> Partnership <input type="radio"/> Income of \$0 - \$500</p> <p><input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE:</p> <p>____/____/09 ____/____/09</p> <p>ACQUIRED DISPOSED</p> |
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Comments:

SCHEDULE B **Interests in Real Property** (Including Rental Income)

| |
|--|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name <div style="text-align: right; padding-right: 20px;">Michael H. Murray</div> |

► STREET ADDRESS OR PRECISE LOCATION
531 West Willow Street

CITY
Willows

| | |
|---|---|
| FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: <div style="display: flex; justify-content: space-around;"> <div> <input type="text"/> / <input type="text"/> / 09 ACQUIRED </div> <div> <input type="text"/> / <input type="text"/> / 09 DISPOSED </div> </div> |
|---|---|

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ ☐ _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

► STREET ADDRESS OR PRECISE LOCATION

CITY

| | |
|--|---|
| FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE: <div style="display: flex; justify-content: space-around;"> <div> <input type="text"/> / <input type="text"/> / 09 ACQUIRED </div> <div> <input type="text"/> / <input type="text"/> / 09 DISPOSED </div> </div> |
|--|---|

NATURE OF INTEREST
☐ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ ☐ _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

| | |
|---------------------------------------|---------------------|
| INTEREST RATE | TERM (Months/Years) |
| _____ % <input type="checkbox"/> None | _____ |

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

| | |
|---------------------------------------|---------------------|
| INTEREST RATE | TERM (Months/Years) |
| _____ % <input type="checkbox"/> None | _____ |

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name Michael H. Murray |

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Glenn Colusa Irrigation District

ADDRESS (Business Address Acceptable)

344 Laurel Street, Willows, CA. 95988

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Irrigation District

YOUR BUSINESS POSITION

Executive Assistant & Training Coordinator

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☒ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____ % ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address

_____ City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

California Form 700
F.P.P.C.
Schedule A-1

Stocks held

EDISON INTERNATIONAL, 312 shares, Communication Corp.

FAIRPOINT COMMUNICATIONS, 6 shares, Communications Corp.

VERIZON COMMUNICATIONS COM, 325 shares, Communications Corp.

AT&T INC COM, 1157 shares, Communication Corp.

AMEREN CORP COM, 55 shares, Communications Corp.

DTE ENERGY CO COM, 16.5 shares, Utility Company

Mutual Fund

INCOME FUND OF AMERICA CLASS C, 1946.22 shares

Fair Market Value of all stocks and Mutual Funds listed are \$ 99,676.00

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the state of California that the foregoing is true and correct.

/s/Michael H. Murray

Form 700 F.P.P.C

Attachment to cover page listing agencies

Glenn County Transportation Commission

Glenn County Transit Committee

Local Agency Formation Commission

**First 5 Glenn County Children and Families
Commission**

Golden State Risk Management Authority